|   |  |   |                |   |                     |                 | Application or Docket Number |       |                     |                        |  |
|---|--|---|----------------|---|---------------------|-----------------|------------------------------|-------|---------------------|------------------------|--|
| PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 1997  |  |   |                |   |                     |                 |                              |       |                     |                        |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                |   |                     | SMA             | ALL ENTITY                   | OR    |                     | THAN<br>ENTITY         |  |
| FOR   |  | NUMBI                                     | NUMBER FILED . |   | NUMBER EXTRA        |                 | E FEE                        |       | RATE                | FEE                    |  |
| BASI  | C FEE  |   |                |   |                     |                 | 395.00                       | OR    |                     | 790.00                 |  |
| TOTA  | L CLAIMS   | 4   | minus 20 =     |   |                     |                 | =                            | OR    | x\$22=              |                        |  |
| INDE  | PENDENT CLA  | ums (                                     | minus 3 =      |   | x41                 |                 | =                            | OR    | x82=                | 85                     |  |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |                |   |                     | +135            | j=                           | OR    | +270=               |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |   |                |   | TOTA                | NL              | OR                           | TOTAL | Bh                  |                        |  |
| ·   | CLAIMS AS AMENDED - PART II (Calumn 1) (Calumn 2) (Calumn 3) |   |                |   | SM                  | ALL ENTITY      | OR                           |       | R THAN<br>ENTITY    |                        |  |
| ENT A   | :  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA    | RATI            | ADDI-<br>TIONAL<br>FEE       |       | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| TOW<br>TOW  | Total  | · (6)                                     | Minus          | - 20  | =                   | x\$11           | =                            | OR    | x\$22=              |                        |  |
| AMENDMENT   | Independent  | • 4                                       | Minus          | <del></del> 4                               |                     | x41:            | =                            | OR    | x82=                |                        |  |
| ۷   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM               |   |                |   |                     | +135            | i=                           | OR    | +270=               |                        |  |
| (0-1  |  |   |                |   |                     | TOT<br>ADDIT, F |                              | OR    | TOTAL<br>ADDIT, FEE |                        |  |
|   | ,  | (Column 1)                                | 5              | (Column 2) HIGHEST                          | (Column 3)          | 1               |                              |       |                     |                        |  |
| IDMENT B  |  | REMAINING<br>AFTER<br>AMENDMENT           |                | NUMBER<br>PREVIOUSLY<br>PAID FOR            | PRESENT<br>EXTRA    | RAT             | ADDI-<br>TIONAL<br>FEE       |       | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| MO  | Total  | . 26                                      | Minus          | - 20  | = 6                 | x\$11           | =                            | OR    | x\$22=              |                        |  |
| AMEN  | Independent  | • 6.                                      | Minus          | ··· 4                                       | = 2                 | x41             | =                            | OR    | x82=                |                        |  |
| Ľ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM               |   |                |   |                     | +135            | 5=                           | OR    | +270=               |                        |  |
| (Column 1) (Column 2) (Column 3)  |  |   |                |   |                     | TO'<br>ADDIT. F | TAL                          | OR    | TOTAL<br>ADDIT, FEE |                        |  |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA    | RAT             | ADDI-<br>TIONAL<br>FEE       |       | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| Ş   | Total  | . 26                                      | Minus          | - 26  | =                   | x\$11           | l=                           | OR    | x\$22=              |                        |  |
| RE  | Independent  | . 6                                       | Minus          | ··· (e                                      | =                   | x41             | =                            | OR    | x82=                |                        |  |
| 4   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM               |   |                |   |                     |                 | 5=                           | ОЯ    | +270=               |                        |  |
| - m   | the entry in column the "Highest Nu                          | TO<br>ADDIT.                              | TAL            | OR  | TOTAL<br>ADDIT. FEE |                 |                              |       |                     |                        |  |
| The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                |   |                     |                 |                              |       |                     |                        |  |